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RULES CLEARINGHOUSE

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CLEARINGHOUSE RULE 99-099

Comments

[NOTE: All citations to “Manual” in the comments below are to the Administrative Rules Procedures Manual, prepared by the Revisor of Statutes Bureau and the Legislative Council Staff, dated September 1998.]

5. Clarity, Grammar, Punctuation and Use of Plain Language

a. In the definition of “oral systemic premedications” in s. DE 3.04 (1), the agency may wish to clarify that the term refers to antibiotics that are administered “orally” to patients.

b. It appears that the last sentence of s. DE 3.04 (1) duplicates the provision contained in s. DE 3.04 (3). If so, it should be deleted from s. DE 3.04 (1). In any event, substantive material should not be contained in a definition.

c. In s. DE 3.04 (3), it is not clear that the treatment plan under par. (a) has to be approved by the same dentist “who remains on the premises” under par. (b). The confusion stems from the references to “a dentist” in s. DE 3.04 (3) (intro.) and s. DE 3.04 (3) (a) and the reference to “the dentist” in s. DE 3.04 (3) (b).

d. 1997 Wisconsin Act 96 also authorizes a dental hygienist, under certain circumstances to administer local anesthesia. The agency should consider the inclusion of a statement in the analysis explaining the reason for omitting reference to local anesthesia in this rule.

e. Section 447.02 (2) (d), Stats., requires the board to promulgate rules specifying “the oral systemic premedications and subgingival sustained release chemotherapeutic agents that may be administered by a dental hygienist” Further, in s. 447.06 (2) (e), Stats., upon the delegation of a licensed dentist, a dental hygienist is authorized to administer oral systemic

premedications *specified by the Examining Board by rule* and subgingival sustained release chemotherapeutic agents *specified by the Examining Board by rule*. Technically, the rule does not specify which premedications or agents a hygienist may administer; instead, the rule defines the terms and specifies the conditions and procedures under which the drugs may be administered. The agency should review the rule to determine whether it would be feasible and advisable to clarify this aspect of the rule by more specific references to the drugs that may be administered.